

Thomas M. Menino, Mayor of Boston

CITY OF BOSTON SCHOLARSHIP FUND

COVER SHEET FOR INCOMING FRESHMEN

INSTRUCTIONS:

Verify eligibility, review checklist and complete signature on the cover sheet. Submit complete application package no later than April 2. Mail to: Scholarship Fund, P.O. Box 9715, City Hall Plaza, Boston, MA 02114.

Guidelines for Eligibility

I affirm that I meet the following criterion for eligibility:

- I have been a legal <u>resident of Boston</u> for at least two years as of January 1, 2010.
- I will have graduated from high school or completed the G.E.D. by the time the awards are made.
- I plan to enroll in a two or four year accredited post-secondary institution within Massachusetts in the upcoming school year.

Checklist

I have provided the following required application materials:									
	A complete City of Boston Scholarship Fund Application. Either enclosed or emailed to COBScholarship@cityofboston.gov. If you have already submitted your application via email, it is not necessary to include an additional copy here.								
	An essay, 300-500 words, answering the essay question: "How has your past service to others influenced your future goals?"								
	One letter of recommendation from school, an employer, or a community agency. Either enclosed or emailed directly from the individual writing the recommendation to COBScholarship@cityofboston.gov. If your recommendation has already been submitted via email, it is not necessary to include an additional copy here.								
	☐ An official secondary school record and SAT or TOEFL scores if available, or a G.E.D. score report.								
	Signature								
Name:									
Signati	nre: Date:								
Parent or Guardian Signature (if applicant is under 18 years of age):									

City of Boston Scholarship Fund

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APPLICATION FOR INCOMING FRESHMEN

INSTRUCTIONS:

- 1. Open the document in Microsoft Word and type the information requested into the gray areas. These fields will expand to fit as much text as you put in. Be sure to answer all the questions.
- 2. Once you have filled out all fields, save a copy to your computer.
- 3. Email the completed form to COBScholarship@cityofboston.gov.
- 4. After submitting your application, print cover sheet and follow instructions for submitting required application materials by mail.

			A	pplicant Informa	ation			
Full Name:					Number:			
	Last		First	First		M.I. Internal Use Only		
Address:								
Street Address					Apartment/Unit #			
	City				State	ZIP (Code	
Home Phone:	_()	-	Date of Birth:	/	/		
Cell Phone:)	-	Place of Birth:				
E-mail:					City	State	Country	
·				-	Race or Ethn	ic Group (opti	onal).	
Are you a citizen of the United		U nited			Race or Ethnic Group (optional):			
States?			☐ YES	□NO	☐ AMERICAN INDIAN		☐ LATINO	
Are you a permanent Alien Resident?		en	☐ YES	□NO	☐ AFRICAN AMERICAN OR BLACK ☐ WHITE		ACK □ WHITE	
11001401111								
					ASIAN OR PACIFIC ISLANDER			
Gender (optional):			☐ MALE	☐ FEMALE	OTHER _			
			Seco	ndary School Ed	lucation			
High School:								
Address:								
			D 1 . 2	. Class		Clara Chan		
Cumulative GPA:			Kank 11	n Class:		Class Size:		
GED Program:								
								
Score:		Date of Completion:						

Post-Secondary School Plans Provide the names of post-secondary institutions to which you have applied or been accepted. Recipients of the scholarship must attend a post secondary institution in Massachusetts. School Name: School Name: School Name: School Name: School Name: School Name: Field of Study: Expected Date of Entry: Financial Data Finalists will be required to provide a copy of their most recent 1040 tax return and student Aid Report (SAR) for verification of financial need. With your application, you need to provide the following documents for verification of financial aid: Your most recent 1040 Tax Return • Financial aid package from the college you attend (including total scholarships, grants and loans already secured) ■ FAFSA (Free Application for Federal Student Aid) A. Estimated Educational Cost B. Living Expenses (Room and Board) \$ C. Total Expenses (A plus B) \$ D. Family Contribution to Expenses E. Scholarships, Grants, Loans and Other Sources \$ F. Total Support (D plus E) G. Calculate Financial Need (Subtract F from C) \$ **Community Involvement** List all volunteer and community service activities during the past two years. Type of Activity Hours/Week **Position Grade Level** 9 10 □ 11 □ 12

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W	Vork Experience			
Describe your work experience during the past two year	ars.			
Employer:	Your Position:			
Address:	Supervisor:			
Employed From: To:	Hours Worked Per Week:			
Employer:	Your Position:	_		
Address:	Supervisor:			
Employed From: To:	Hours Worked Per Week:			
Employer:	Your Position:			
Address:	Supervisor:			
Employed From: To:	Hours Worked Per Week:			
	Activities			
List your principal extracurricular activities in order of				
Type of Activity	Position Gr	ade Level		
		9 10	<u> </u>	<u> </u>
		9 🔲 10	<u> </u>	<u> </u>
		9 🔲 10	<u> </u>	<u> </u>
		9 10	<u> </u>	<u> </u>
		9 10	<u> </u>	<u> </u>
Aw	vards and Honors			
List all academic and community awards and honors.				
Honor		Date		
		·		

Essay Question

Please write an essay (300-500 words) on the topic below.

"How has your past service to others influenced your future goals?"